

# The Helix Pet Hospital

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The following is an anesthesia authorization form, permitting Helix Pet Hospital to place your pet under general anesthesia. Please read thoroughly and have our staff answer any questions that may arise:

I am dropping off \_\_\_\_\_, for an anesthetic procedure today. I am over 18 years of age and am the owner and responsible party regarding \_\_\_\_\_. I understand there are risks involved with anesthesia and surgery. Helix Pet Hospital and its staff do everything in their power to mitigate those risks, but they can include complications up to and including death. The risk for complications has been explained to my satisfaction, and I permit you to place my pet under general anesthesia. Yes\_\_\_\_\_ No\_\_\_\_\_

A pre-anesthetic laboratory panel (+/- thoracic radiographs) is recommended prior to putting any pet under anesthesia. This will help to evaluate your pet's ability to handle anesthetic medications, and their fitness for any surgical procedures being performed. A panel will evaluate their liver and kidney function as well as take into account their complete blood cell count. Please indicate whether these recommended diagnostics have been done or you are accepting of having them done today prior to your pet's procedure. (The cost of this/these will be on the estimate provided) Yes\_\_\_\_\_ No\_\_\_\_\_

I have read and signed the estimate provided for the procedure today and it has been explained to my satisfaction. Yes\_\_\_\_\_ No\_\_\_\_\_

The best phone number to reach me today is: \_\_\_\_\_

Signed: \_\_\_\_\_

Date: \_\_\_\_\_